

Lee: This is Stay Happily Married number 148, Dealing with Depression.

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Lee: I'm Lee Rosen, and I'm your host today. Welcome to the show. If you or your spouse suffer from depression, you already know how hard it can be on both of you. Maybe, you feel like you don't know how to handle your partner's depression, or on the other hand, maybe you don't think your partner is really understanding what it is that you're going through. How do you continue to relate to each other when negative feelings can't just be pushed aside?

Colette Segalla, a psychologist with Lepage Associates in Durham, North Carolina, is here to discuss what depression feels like to partners on both sides and what you can do to keep your relationship strong in spite of depression. Colette has extensive training and experience working with people of all ages, with special training in the field of adult relationships. She's used her integrated approach to help lots of couples overcome both their individual and relational problems to improve their relationships.

Colette, welcome back to the show.

Colette: Thank you. It's good to be here.

Lee: I'm sad to have to tell you we're going to talk about depression. I don't have a perky topic for you today.

Colette: Yeah.

Lee: Yeah, you know. Let me ask you this. We're bringing it down. How many people are suffering from depression in the U.S.? What are the numbers? Tell us.

Colette: Lee, there's a lot of people suffering depression. There are different types of depression, but major depressive disorder, there are probably about 15 to 20 million people, which is about seven or eight percent of the adult population suffering depression in the U.S. More significantly, about 70 million people will meet the criteria for major depression at some point in their lives, which is one in four people.

Lee: Wow!

Colette: That means a lot of people will have to deal with depression at

one point or another in their lives or in their relationships.

Lee: Yeah. When you say the relatively small percentage that you mention at first, you think, well, then it's not that big a deal. But when you're talking about one in four, it's like if you're not dealing with this now, there's a good chance you or your spouse will be.

Colette: That's right.

Lee: Boy, I'll tell you. You may not know this answer to this, but are we unusual in terms of the depression numbers in the U.S., or is this a phenomenon that goes on everywhere?

Colette: Rates of depression are definitely higher in the industrialized world. So, most of Western Europe, the U.S., any industrial country is going to have higher rates of depression than the third world countries. Depending on the study that you read, some people say that the U.S. is even higher than Western Europe, for example.

Lee: Wow, that's very interesting. We're talking about marriages and keeping marriages working. If you are married to someone who is suffering from depression, what is it that that person who is depressed, what are they feeling? What are they going through?

Colette: There's a whole host of symptoms in people who are clinically depressed. They're going to have physical symptoms, emotional symptoms, and even cognitive symptoms.

The depressed person might feel physical symptoms like fatigue, persistent fatigue, aches and pains, they may be having difficulty sleeping, waking up periodically throughout the night or not being able to sleep. On the other hand, they may sleep more than usual. They may be sleeping 9, 10, 11, 12 hours per day. They may also be eating more or eating less. Those are some of the physical symptoms they may have.

Emotionally, they may have feelings of persistent sadness. They may also feel very guilty or a sense of worthlessness and hopelessness. They may also be much more irritable and more inclined to lash out and get angry. They may also have obsessive thoughts. They'll probably lose interest, or have lost interest in activities that they're normally interested in and normally get pleasure out of. Significant for relationships especially is that they may have a decreased interest in sex or decreased sex drive. So, that can, of course, have a big impact on the relationship.

Cognitively, they may have much more difficulty concentrating and difficulty with their memory. So, there are a lot of symptoms that the person who is clinically depressed will be experiencing.

Lee: Right. That is a long list of things, but it makes a lot of sense. What

might depression look like and feel like from the other partner's perspective, the person who's not suffering from depression?

Colette: From the partner's perspective, they may be able to see the fatigue in their partner, the irritability, they may not have a lot of get up and go. They may see a loss of interest in things. They may see their partner maybe not keeping up with chores as usual or not taking care of themselves. Maybe, they stop exercising or stop doing the things they like to do or even, perhaps, not taking care of the children as they once did. The partner of the depressed person will also most likely notice the decreased interest in sex. They may be the recipient of a more critical attitude of the depressed person toward the un-depressed partner, kind of that irritability turned both inwards and outwards.

Unfortunately, it can be really difficult for the person who's not depressed to understand what's going on with their partner and to not take the decreased interest in sex, for example, as a rejection, or not to take the irritability and increased criticism from their partner personally. It's hard to understand what's going on.

Lee: Right.

Colette: Often the symptoms of depression come on gradually, so sometimes it's difficult for the partner to see the change without taking it personally and becoming defensive or feeling rejected. That's one of the most challenging aspects of living with a depressed partner, is to see the depression for what it is, and that is an illness, not begin to think that it's all about the relationship.

Lee: Yeah, I can see that. That really would be tough, because if your partner is irritable at you, or not interested in sex with you, you start feeling like, well, they must not like you any more. You've done something wrong.

Colette: That's right.

Lee: That is very complicated. What . . .

Colette: And . . .

Lee: Go ahead. Yeah.

Colette: Sorry. I was just going to say, it's also sometimes really difficult for the person who's not depressed to realize that the depressed person, it's not just a matter of being able to snap out of it. They can't just shake it off if they're clinically depressed. Especially if the un-depressed person has not experienced the clinical depression before, they may not realize how difficult it is to address and to turn it around.

Lee: This is sort of a tricky question. I'm not even sure how to ask it.

Let's say your partner is not happy with you, irritable, not interested in sex, whatever it feel like to you as the recipient of all that, being the not depressed spouse, although my guess is you're headed in the depressed direction pretty quick with all that going on.

Are you suggesting that if my spouse is irritable with me, or not happy with me in that way, that it really is not revealing of anything about the relationship? Or would they just do a better job of covering it up if they weren't depressed? You know, not saying mean things, or whatever.

Colette: Yeah. Now, that's a tricky one because sometimes depression can be related to the relationship, itself. That really needs to be addressed as a couple. What I'm primarily talking about is when there's a depression going on, a clinical depression, maybe the depressed person has a predisposition toward being depressed. Maybe they have a family history of depression. Maybe they're confronting something that was a catalyst for a clinical depression. It's not necessarily related to what's going on in their relationship, like all else otherwise is pretty much as it was before the depression hit.

Lee: Right.

Colette: When we have the symptoms of irritability and all the other symptoms I talked about, that's when it's more related to the depression going on in the individual.

Lee: Okay.

Colette: It's not to say that if there's irritability in one partner and they're voicing concerns about the relationship that the partner who's not depressed should say, "Well, this is just because you're depressed, and it has nothing to do with me and nothing to do with the relationship." That needs to be addressed and sorted out by the couple together.

Lee: Right. Right. I was looking at that as a get out of jail free card for them.

Colette: Right.

Lee: Yeah. It's like, "Oh, okay. Good. It's not me, it's you."

Colette: Not so fast.

Lee: Right. What happens when you have this going on in a marriage, you have somebody suffering depression? Do you find that resentment builds, that things start to get out of control between the spouses?

Colette: Absolutely. This is a really common response, for resentment to build up, especially when it goes on for a long period of time. The

resentment builds up when the person who is not depressed cannot differentiate between the illness and the person. It also builds up when there are repeated feelings of rejection over not wanting to have sex and the irritability and criticism from the depressed person. Those can all feel very hurtful to the partner. So, these things all contribute to feelings of resentment.

Even when the partner who's not depressed can differentiate the illness from the person, resentment can sometimes build because it's so difficult to have a partner who suffers from this illness. It may feel like the depressed partner is maybe limiting the other person's ability to enjoy him or herself, or that they can't do the things they used to do, or that there's more work to be done by the partner who's not depressed. All of these can lead to resentment between the partners when one person is depressed.

Lee: Right, right. Yeah, it does sound like a very difficult cycle. What ultimately ends up happening in marriage and to the whole family unit when you have this sort of persistent problem lingering on?

Colette: When the depression goes untreated, the impact on the marriage and the family can really be devastating, actually. The children may suffer from not having the love and attention they need from their depressed parent. Household routines and activities may begin to unravel. The security of the routines may erode away when they're no longer followed because of depression, and the kids may begin to internalize some of the negative emotions of the depressed parent. This is all when it's going untreated.

The marriage, itself, also suffers when there's persistent unhappiness and the depression goes untreated. Rather than feeling a feeling of partnership and affection, when there's persistent unhappiness, the relationship is much more likely to become adversarial and unsupportive to both partners. So, when the depression goes untreated, the results are not good for either the family or the marriage.

Lee: Yeah. Yeah, I can see that, that it really would not go well. At that point, is it possible to get the relationship back to a positive place, or is that really a tough challenge?

Colette: It certainly is possible. The difficulty, once again, is being able to differentiate between the person and the illness. If there's been persistent unhappiness and resentment has built up over a period of time, then the trust that would normally exist between the partners has probably eroded. It can be difficult to reestablish that trust. There may have been many hurtful experiences that can sometimes be hard to forgive for some people.

The key is not to let the marriage get to that point in the first place but to get the depression treated as soon as possible. Even if it has gone untreated for some period of time, if there's a willingness on the part of both partners, it is still possible to bring it back and to rebuild, and actually to strengthen the relationship based on overcoming the struggle of having that as a part of the marriage.

Lee: Right. Now, you mentioned a lot of the things that go on when someone is depressed. It sounds tricky to me, when you really start thinking about it. If I wanted to sit down and analyze my spouse and say, is she or is she not depressed? You know, things like irritability, I mean, everybody's irritable sometimes. Weight gain or weight loss. Who doesn't?

Colette: Right.

Lee: Weight gain. Gosh. Talk to me. You know. [laughs]

Colette: Exactly.

Lee: If you have to get serious about this, you know, you're listening to this and you're thinking maybe this is what's going on, but I really want to know, what really do you need to look for specifically? What's the test? How do you really figure this out? Is this person suffering from depression or not?

Colette: Right. You really have to look at the whole picture, which can sometimes be difficult to do. When you're caught up in a cycle of someone being irritable and then there's being a reaction, we get into a tangled mess over that kind of thing. It can be difficult to kind of step back and take a broader perspective and see what's going on in the bigger picture. You really have to do that, to step back a little bit and evaluate.

There needs to be more than just weight loss or weight gain or more than just fatigue. It's got to be a combination there of about, at least five symptoms on the list of criteria that need to be met in order for it to be diagnosable clinical depression. So, there would be not only the weight gain or loss. You don't necessarily have to have that particular symptom, but I'm just listing it as a possibility of one of, at least five symptoms together that would be clinical depression.

So, maybe weight gain or weight loss, the fatigue, the lack of interest in things, irritability, sadness, depressive thoughts, thoughts of worthlessness, helplessness, the decreased sex drive, difficulty concentrating. You'd have to be able to pick out a number of those.

The thing is that people who are not medically trained or who are not psychologists or psychiatrists or social workers, typically they're not really in a position to actually make a diagnosis. You may have the feeling, and you may suspect that your spouse is depressed, but it's really important to see a doctor to make the diagnosis and get treatment that is specific to

your spouse or your partner as soon as possible.

The sooner the depression is treated, the better, both in terms of improving the well-being of the person and the relationship and ensuring that the depression doesn't become prolonged or have a greater likelihood of returning later.

Lee: Right. How treatable is this? What do we do with somebody who is suffering from depression? Can it really be fixed?

Colette: Depression is very treatable. There are many forms of treatment that really can make a big difference for the depressed person and his or her partner. There are, of course, treatments that involve medication, treatments that involve psychotherapy, and there are also lifestyle changes that can all contribute to living a life free of depression.

Usually it's going to take a combination of one or two of those forms of treatment. Therapy, medication or lifestyle changes. Medication is not the only answer for depression. It's one answer. When medication is used, it's usually best used in combination with therapy and actually lifestyle changes.

Lee: What are the lifestyle changes? What kind of things are we talking about?

Colette: There are things like healthy eating. There are things like exercise. There are things like maintaining social connections with people. There are things like getting an adequate amount of sunlight because of what happens in the body when we have sunlight. There are things like getting a handle on depressive kinds of thinking. Cognitive therapy is a way of getting a handle on the depressive thoughts that can be like a runaway train and really have an impact on the person.

Most of the lifestyle changes that I'm talking about basically bring us back to what was the life of a human being like before industrialization and the age of technology? People were physically active. They were eating more natural foods. They were outside a lot more. They were much more socially connected. So, all of those things are common sense when you look at the way human beings lived for thousands of years before industrialization. We say, "OK. We need to bring some of that back into our daily lives in order to manage and get rid of depression."

Lee: Right, right. So you don't think my eating a bag of chips while watching TV all by myself is really a good plan, huh?

Colette: That's not a good idea.

Lee: But it makes me happy.

Colette: It may make you happy in the moment, but . . .

Lee: [laughs] OK. Yeah, I was starting to think exercise and healthy food, now I'm getting depressed. No, no I do. I think you're right. I think when you're doing all those things that that makes a huge impact. I know, from my experience, boy, exercise is like a powerful drug. It does put you in a good mood all day.

Colette: Yeah.

Lee: Yeah.

Colette: Absolutely. The key would not be to try to reintroduce all of that at the same time. As you say, it can be depressing to try to think about trying to do all of that, especially if you're doing none of it, or if you're doing very little of it. The idea would not be to, "Okay. Go out and make all of these lifestyle changes tomorrow," but it would be to have a systematic and patient approach to reintroducing some of those lifestyle changes.

Lee: So, let's say you've got a spouse and you've concluded that they are depressed and they're seeing a psychologist. Maybe, they're doing the lifestyle changes and they're getting some medication and things are heading in the right direction, but it's not like you get a shot and it's fixed.

Colette: Right.

Lee: It's one of these things that takes time to work out. They're going to meetings with the psychologist, et cetera. What do you do? You're married to this person. You want things to work out. How do you stay supportive? What are the best things to keep in mind as you're trying to keep the relationship rolling along?

Colette: The first step to take to stay supportive of each other during a time like this is to learn how to differentiate the depression from the person. It's important to make that distinction. That way, the partnership can remain intact while the depression is being relegated to a position outside of the partnership and it can be addressed by both people. So, first and foremost, that kind of attitude toward it is one way to stay supportive of each other and one way to maintain the partnership, the sense of partnership and togetherness between the two people.

Sometimes, making the differentiation, as I said, is really difficult. Meeting with the therapist, as you say, to address the problem is a really important step to take. It's also important for both people in the partnership to have support when one person is depressed. That means that sometimes individual therapy can also be a big support to the relationship and to both partners, or it can also be support in the form of social contact for both people.

It's really important for both people to have a sense of



connection with others. This can either be done as a couple or individually, but maintaining connections with other people is crucial in order to be able to support one another. The person who is not depressed should not have the burden of responsibility of being the sole support for the depressed person. That's just too much on one person. The depressed person needs other people and the non-depressed person needs his or her own support.

Other things are just to remember to do things like eat healthy and stick to healthy routines and being sure to get out of the house and being engaged in the world.

Lee: Right, right. As you're going through that process, is there anything important that you ought to be keeping in mind about how your partner is feeling and what they're going through?

Colette: Yeah. It's important to keep in mind that the other person may be feeling vulnerable, insecure, they may be scared about what's going to happen, what does it mean for the relationship, will the other person ever get out of the depression? Both might feel afraid that the other person will reject them and that the marriage is in jeopardy. Those are feelings that are very common on both sides, and they're important to keep in mind in order to increase our ability to be compassionate toward the other person.

So, the most important thing to keep in mind, though, is that depression is treatable. By drawing on the strengths in each other and the relationship, the depression can be overcome. Patience and compassion will really go a long way toward getting the relationship back to a loving and mutually supportive state.

Lee: Terrific. Colette, thank you so much. Great information about a difficult topic. I really appreciate you being with us today.

Colette: Oh, you're welcome. It's great to be here.

Lee: You can learn more about Colette and her practice by visiting the website for Lepage Associates. It's [LepageAssociates.com](http://LepageAssociates.com). I will put a link to it in the show notes. You can also reach their office at 919-572-0000. They're in Durham, North Carolina.

Thank you so much for being with us today. I really appreciate you taking some time to join in. I hope that we've been helpful to you. In the meantime, between now and our next episode, we'd love to hear from you. If you have comments, feedback, suggestions, a couple of ways to reach us. Our comment line is 919-256-3083. You can also email us at [comments@stayhappilymarried.com](mailto:comments@stayhappilymarried.com). I'm Lee Rosen. Until next time, stay happily married.

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